



THIRD PARTY SIGNATURE AUTHORIZATION for Special Waste Disposal

Date: _____

This Authorization is only valid for 3 years
from the above date.

To Whom It May Concern:

Please be advised that the following company/individual has been appointed to work as our agent for purposes of managing waste materials that we may generate.

Name of Authorized Agent	Title
Name of Company	Telephone Number

The above broker/individual is authorized to act as our authorized agent for the following purposes:

- ☐ Complete and sign Special Waste Profile.
- ☐ Complete and sign Special Waste Profile-Recertification.
- ☐ Authorize amendments to Special Waste Profile.
- ☐ Sign contracts to dispose and/or transport material.
- ☐ Sign certifications necessary to comply with landfill requirements.
- ☐ Sign manifests to initiate shipment to disposal facilities.

Our authorized agent will notify us prior to any action stated above, and will provide us with copies of any documents bearing our name.

Name of Company	Mailing Address
Generator Contact (Print Name)	Title
Signature	Telephone Number